

P & T ADVISORY COMMITTEE OPTIONS

NOVEMBER, 2007

1. DMS to select all generics based upon economic evaluation
 - a. Generic products will be selected once an economic evaluation of the available products has been performed
 - b. Selection of generic products for Preferred status will be based on this economic evaluation
2. DMS to select all single source brand agents
 - a. All single source branded products will be designated as Preferred (and shall not require a prior authorization)
3. Agents not selected as preferred will require prior authorization, but will remain at a Tier 1 copayment for generic alternatives, and a Tier 2 copayment for branded multi-source products
 - a. Under normal circumstances, products designated as Non-Preferred are available, after Prior Authorization, but at a Tier 3, or Non-Preferred, copayment
 - b. Based on this recommendation, even products that are designated as Non-Preferred will continue to be available, upon Prior Authorization, to recipients at Preferred copayments
 1. Tier 1 for generic alternatives
 2. Tier 2 for branded multi-source products
4. Require therapeutic failure of one preferred agent prior to approval of a non-preferred agent
 - a. Patients to experience a therapeutic failure, adverse drug reaction, or other clinically significant event with one Preferred agent in order to receive Prior Authorization to obtain Non-Preferred products
 1. Please see #5 below regarding continuation of therapy
5. Allow continuation of therapy for agents selected as non-preferred for patients who have a history within the last 90 days
 - a. Recipients will be allowed to continue current (within the past 90 days) therapy with any branded or generic Non-Preferred product